AME	Docket No. 0152-0694PUS1											
Application		Filing I		Examiner		Art Unit						
10/501,504-Conf. #8266		July 15, 2004 S. Jav		S. Javanma	rd	1614						
Applicant(s): Seis	shiro Mochizuki	et al.										
	PREPARATION S AS THE ACT			NTAINING PURPL	JRICENU	S TEMMINCKII						
MS Amendment Commissioner for P.O. Box 1450 Alexandria, VA 22 Transmitted here	313-1450	ndment in the	above-identif	ied application.								
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.												
CLAIMS AS AMENDED												
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate								
Total Claims	18	- 20 =	0	x 50.00		0.00						
Independent Claims	5	- 7 =	0	x 200.00		0.00						
Multiple Depend		360.00										
Other fee (pleas	se specify):											
TOTAL ADDIT		360.00										
x Large Entity				Small Entity	,							
	al fee is require	d for this ame	ndment.									
X Please charge Deposit Account No. 02-2448 in the amount of \$ 360.00 . A duplicate copy of this sheet is enclosed.												
A check in the amount of \$ is enclosed.												
Payment by credit card. Form PTO-2038 is attached.												
	r is hereby auth d below. A dup			: Deposit Account N	lo. <u> </u>	2-2448						
	ny overpaymer		tino onectio	5110103 5 4.								
x Charge	any additional fil	ing or application	n processing	fees required under	37 CFR 1.	.16 and 1.17.						
AM My	elmy In			Dated:	Septembe	r 17, 2007						
"Gerald M. Mµr Attorney Reg	ohy, Jr/ No.: (38)977											
BIRCH, STEW 8110 Gatehous Suite 100 East P.O. Box 747 Falls Church, \ (703) 205-8000	se Road /irginia 22040-		LP									

PTO/SB/17 (07-07)
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Effective on 12/08	2004.	Complete if Known									
Fees pursuant to the Consolidated Approp	Application Nun	Application Number 10/501,504-Co			nf. #8266						
FEE TRANS	Filing Date		July 15, 2004								
For FY 20	First Named Inv		Seishiro Mochizuki								
FOIFI Z	Examiner Name		S. Javanmard								
Applicant claims small entity stat	Art Unit		1614								
TOTAL AMOUNT OF PAYMENT	Attorney Docket	Attorney Docket No. 0152-0694PUS1									
METHOD OF PAYMENT (check all that apply)											
Check Credit Card Money Order None Other (please identify):											
x Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch,											
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)											
x Charge fee(s) indicate	d below	Charg	e fee(s) i	ndicated below, ex	cept for th	ne filing'fee					
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17											
FEE CALCULATION											
1. BASIC FILING, SEARCH, AND EXAMINATION FEES											
Į Fi	LING FEES SI Small Entity	EARCH FEES	EXAM	INATION FEES							
Application Type Fee (\$		Small Entity (\$) Fee (\$)	Fee (\$	Small Entity) Fee (\$)	Fees F	ald (\$)					
Utility 300	150 500	250	200	100							
Design 200	100 100	50	130	65	_						
Plant 200	100 300) 150	160	80							
Reissue 300	150 500	250	600	300							
Provisional 200	100	0	0	0							
2. EXCESS CLAIM FEES						Small Entity					
Fee Description Fee (\$)											
Each claim over 20 (including Reiss	50	25									
Each independent claim over 3 (inc.	uding Reissues)				200	100					
Multiple dependent claims					360	180					
	Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims										
HP = highest number of total claims paid fo		Fee (\$) Fee Paid (\$)			<u>) </u>						
HP = highost number of total claims paid for, if greater than 20. 360.00 360.00											
Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)											
HP = highest number of independent claims paid for, if greater than 3.											
3. APPLICATION SIZE FEE											
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).											
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)											
100 = /50 = (round up to a whole number) x =											
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)											
Other (e.g., late filing surcharge):											
SUBMITTED BY A A											
Signature M. W. Www.	mu A.	Registration No.	28,97	7 Tetephone	(703) 20	5-8000					
Name (Print/Type) Gerald M. Murph		(Attorney/Agent)		-	• •						
Hame (Fillio 1995) Geraid IVI. IVIII pr	y, vi. / U			Dale	September	17, 2007					